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Address

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Robinson Intellectual Property Law Office, P.C.

State

Telephone

=					PTO/SB/05 (03-0			
<u> </u>	1171117	F\/	Attorn	ey Docket No.	0756-7273			
		UTILITY		nventor	Mitsuaki OSAME et al.			
	PATENT APP TRANSMI		Title DISPLAY DEVICE AND DRIVING METHOD THEREOF					
(Only for	r new nonprovisional applic	cations under 37 CFR 1.53(b))	Express Mail Label No.					
	APPLICATION E	LEMENTS	Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231					
See MPE	P chapter 600 concerning uti	lity patent application contents.						
(S	ee Transmittal Form (e.g., PT	e processing)	 CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 					
S	pplicant claims small entity st ee 37 CFR 1.27. pecification [Total P		Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)					
	Specification [Total Pages 42] (preferred arrangement set forth below) - Descriptive title of the invention			a. Computer Readable Form (CRF)				
- - -	Cross Reference to Relate	d Applications (if applicable) sponsored R & D (if applicable) ing, a table,		i. CD-RO ii. paper	quence Listing on: M or CD-R (2 copies; or			
-	Background of the Inventio	n	C.	□ Statements v	verifying identity of above copies			
-	Brief Summary of the Inver Brief Description of the Dra			ACCOMPANY	ING APPLICATION PARTS			
	Detailed Description Claim(s) Abstract of the Disclosure		10.	37 CFR 3.73() (when there is	Papers (cover sheet & document(s)) b) Statement Power of s an assignee) Attorney			
4. 🛭 D	rawing(s) (35 U.S.C. 113)	[Total Sheets 15]		☐ English Trans ☐ Information D ☐ Statement (ID				
	_	[Total Pages]] Preliminary A	mendment			
	Newly executed (original o Copy from a prior application (for continuation/divisional	on (37 CFR 1.63(d))		(Should be sp	ot Postcard (MPEP 503) secifically itemized) y of Priority Document(s) 03/26/2003; JP2003-275723 07/17/2003;			
i.	DELETION OF INVENTY Signed statement attack named in the prior apple 1.63(d)(2) and 1.33(b)	hed deleting inventor(s)		122(b)(2)(B)(i	n request under 35 U.S.C.). Applicant must attach form r its equivalent.			
6. 🛛 A	pplication Data Sheet. See 3	7 CFR 1.76	' -					
18. If a (CONTINUING APPLICATION ent, or in an Application Data	N, check appropriate box, and su Sheet under 37 CFR 1.76:	oply the	requisite informa	ation below and in a preliminary			
	Continuation Divisional	☐ Continuation-in-part (CIP)	of	orior application No	o .:			
•	oplication information:		p / Art Un					
supplied u	under Box 5b, is considered a p ted by reference. The incorpor	PS only: The entire disclosure of the accompart of the disclosure of the accompation can only be relied upon wher	panying	continuation or di				
		19. CORRESPONDENC	E ADD	RESS				
□ Custor □ Custor	mer Number or Bar Code Label	31780		Or	☐ Correspondence address below			

Virginia

571-434-6789

Registration No. (Attorney/Agent)

Zip Code

Date

20165 571-434-9499

53,470

March 25, 2004

PTO/SB/17 (10-03)
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				Complete if Known								
FEE TRANSMITTAL				Application Number								
				Filing Date				March 25, 2004				
FOR FY 2004				First Named Inventor			tor	Mitsuaki OSAME et al.				
Effective 10/01/2003. Patent fees are subject to annual revision.				Examiner Name								
☐ Applicant Claims small entity status. See 37 CFR 1.27.				Group Art Unit					···			
TOTAL AMOUNT OF PAYMENT (\$)40.00				Attorney Docket No. (0.	0756-7273	0756-7273			
	METH	OD OF PAYME	NT		FEE CALCULATION (continued)							
1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:					3. ADDITIONAL FEES							
					Larg Enti	•	Small Entity					
Deposit				Fee		Fee	Fee					
Account Number	50-2280		Code	(S)	Code	(\$)	Fee Desci	ription		Fee Paid		
Number				1051	130	2051		Surcharge – late fili	-			
Deposit Account	Robinson Intellectual Property Law Office			1052	50	2052	25	Surcharge - late pro	ovisional filing fee	e or cover sheet		
Name				1053	130	1053	130	Non-English specifi	ication			
Charge	Any Addition	al Eas Paguirad			1812 2,520 1812 2,520 For filing a request for ex parte reexamination							
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 and credit overpayments					1804 920* 1804 920* Requesting publication of SIR prior to Examiner action							
					1,840*	1805		Requesting publication of SIR after Examiner action				
	nt claims sma	ill entity status.		1251	110	2251		Extension for reply				
2. 🗷 Payme	nt Enclose	d:		1252	1252 420 2252 210 Extension for reply within second month							
Check	☐ Cred	it Card	oney	1253	950	2253		Extension for reply				
			rder	4	254 1,480 2254 740 Extension for reply within fourth month							
		CALCULATION	N	-1	2,010	2255		Extension for reply	within fifth mont	h		
1. BASIC FILING FEE				1401	330 330	2401 2402		Notice of Appeal	nort of an annual			
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Code (\$)	Code (S)	Fee Paid	1403	290	2403		Request for oral hea	=	••		
1001 770	2001 38	5 Utility filing	fee		1,510	1451		Petition to institute		eeding		
1002 340	2002 17			1452	110 1,330	2452 2453		Petition to revive – Petition to revive –				
1003 530	2003 26	Ü			1,330	2501		Utility issue fee (or			<u> </u>	
1004 770	2004 38	-		1502	480	2502		Design issue fee				
1005 160	2005 8	0 Provisional fi	ning ree	1503	640	2503		Plant issue fee				
SUBTOTAL (1) (\$)					130	1460	130	Petitions to the Con				
2. EXTRA CLAIM FEES					50	1807	50	Processing fee unde				
Fee from					180	1806	180	Submission of Info				
Total Claims -20** = X \$18 =					40	8021	40	Recording each pat	\$40.00			
Independent 3** = X \$86 =					770	2809		number of propertie Filing a submission	on (37 CFR	<u> </u>		
Claims								§ 1.129(a))	•	•		
Multiple Dependent =				1810	770	2810		For each additional § 1.29(b))	invention to be e	xamined (37 CFR		
Large Entity Small Entity				1801	770	2801		Request for Continu	ued Examination	(RCE)		
Fee Fee Code	Fee F (\$) Code	ee Fee Descript : (\$)	tion	1802	900	1802		Request for expedit	ted examination o	f a design		
1202 18	2202	9 Claims in exc	cess of 20	\	c /			application				
1202 16			claims in excess of 3	Other	fee (spe	ecity)_	-	-				
1203 290 2203 145 Multiple dependent claim, if not paid			* Red	* Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00								
1204 86 2204 43 ** Reissue independent claims over					- y			•	(-)			
1205 18	2205	original pate 9 ** Reissue cl	nt laims in excess of 20 and					CERTIFICA	TE OF MAILING			
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**or number p	id, if greater; For Rei	ssues, see above										
SUBMITTED		Complete (if applicable)										
Name (Print/Type) Robert L. Pilaud							(571) 434-678	39				
Signature		DQ.	197	Allo	rney/A	gent)			Date			